Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JELEN ACCOUNTING SERVICES, INC

Account Number : 120120000052

Phone : (305)591-9180

Fax Number

: (305)591-9167

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN YOURWASH LLC

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JAN-0-5-2017

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Electronic Filing Menu Corporate Filing Menu

Help

305-591-9167

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

YOURWASH LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on 12/11/2015	and assigned
Florida document number L15000206921		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9620 SW 47TH ST	
Principal office address MUST BE A STREET ADDRESS)	MIAMI FL 33165	
Enter new mailing address, if applicable:	9620 SW 477H ST	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI FL 33165	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, ente	· · · · · · · · · · · · · · · · · · ·
registered agent amour the new registered brice address ner	ς.	SSTEE S
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	(10)
	City Florida _	
	City	Zin Code

New Registered Agent's Signature, if changing Registered Agent;

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action		
AMBR	DA SILVA FERNANDO	8245 NW 108TH AVE. UNIDAD :	□ Add		
		DORAL FL 33178			
			□ Change		
AMBR	DA SILVA GROUP AND ASSOC	9100 NW 79TH AVE BAY 7	□ Add		
		HIALEAH GARDEN FL 33018			
			☐ Change		
AMHR	FRANCISCO ORTEGA PEREZ	9620 SW 47TH ST			
		MIAMI FL 33165	 n		
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D. If amen	ding any other i	nformation, enter change(s) h	ere: iAttuch add	ditional sheets, if necessary	.)		
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Dated	12/14/	2016					
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Division of Corporations

January 4, 2017

FLORIDA DEPARTMENT OF STATE

YOURWASH LLC 8373 LAKE DRIVE 108 MIAMI, FL 33166

SUBJECT: YOURWASH LLC REF: L15000206921

Mar. DISOUCEOUSZI

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Stacey M Warren Regulatory Specialist II FAX Aud. #: H16000306134 Letter Number: 117A00000109

Enclosed 5 pages!"

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P.O BOX 6327 - Tallahassec, Florida 32314